

TAMANG SAGOT

PhilHealth Circular No. 2017-0021

APPLICATION OF SUFFICIENT REGULARITY OF PAYMENT OF PREMIUM CONTRIBUTIONS TO THE REQUIRED QUALIFYING CONTRIBUTIONS FOR ELIGIBILITY TO PHILHEALTH BENEFITS

1. Prior to the issuance of this Circular, what is the required number of monthly premium contributions to become eligible to PhilHealth benefits?

Per PhilHealth Circular No. 32, s. 2014, the required number of monthly premium contributions is at least three (3) months within the immediate six (6) months or 3/6 prior to the first day of availment or hospital confinement. The six (6)- month period is inclusive of the confinement month.

2. What is sufficient regularity of premium contributions?

The definition of sufficient regularity of premium contributions as approved by the PhilHealth Board of Directors is “*payment of premium contributions for at least six (6) months preceding the three (3)- month qualifying contributions within the immediate twelve 12-month period prior to the first day of confinement*”.

Illustration 1. Confinement date is December 20-22. Premium payment for Oct-Dec was made prior to the first day of confinement.

12-month period - including the month of confinement

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Remarks
√	√	√	x	x	x	√	√	√	√	√	√	Eligible
√	√	√	√	√	√	x	x	x	√	√	√	Eligible
x	x	x	√	√	√	√	√	√	√	√	√	Eligible
√	x	√	√	√	x	√	x	√	√	√	√	Eligible

Month of Confinement ↑

With sufficient regularity
With 3 months qualifying contributions

3. Why apply sufficient regularity of premium contributions to the existing eligibility requirement for benefit availment?

Sufficient regularity of premium contributions is one of the requirements of the law to enable the member to avail of the PhilHealth benefits as stipulated in Section 12 of RA 10606, to wit:

*“a member whose premium contributions for at least three (3) months have been paid within six (6) months prior to the first day of availment, including those of the dependents, shall be entitled to the benefits of the Program: Provided, That such member can show that **contributions have been made with sufficient regularity**: Provided, further, That the member is not currently subject to legal penalties provided for in Section 44 of this Act.”*

4. With the application of sufficient regularity of premium contributions to the existing eligibility requirement of 3/6, what is now the required number of monthly premium contributions in order for the members to avail themselves of the PhilHealth benefits?

To become eligible to PhilHealth benefits, members should have paid at least a total of nine (9) months premium contributions within the immediate twelve (12)- month period prior to the first day of confinement. The twelve (12)- month period is inclusive of the confinement month.

Illustration 1. Confinement date is December 15-17. Premium payment for Jul-Sept. was made prior to the first day of confinement.

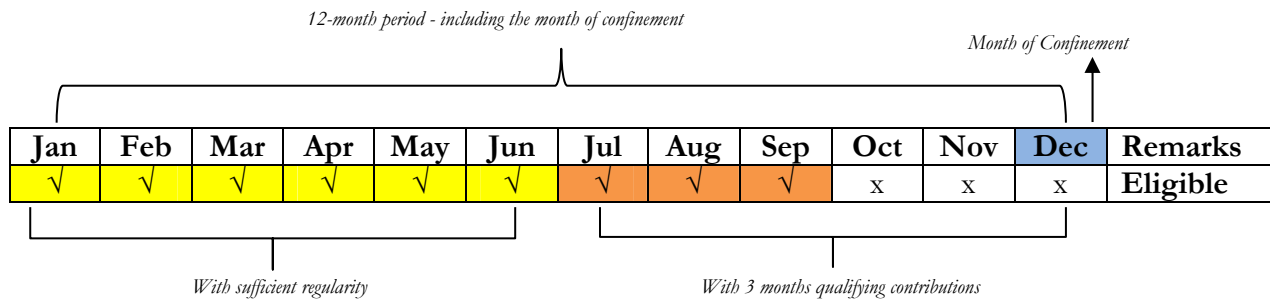


Illustration 2. Confinement date is June 20-22. Payment for Feb, May and June was made prior to the first day of confinement. However, with no sufficient regularity of premium contribution, patient is ineligible to avail of benefits.

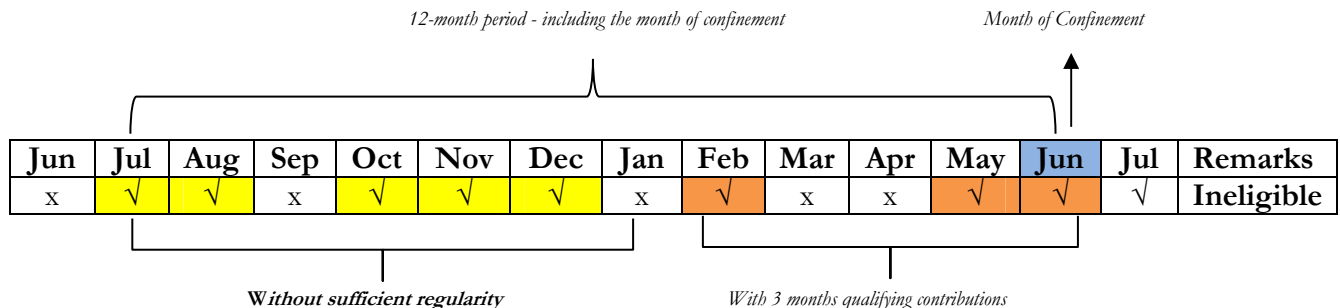
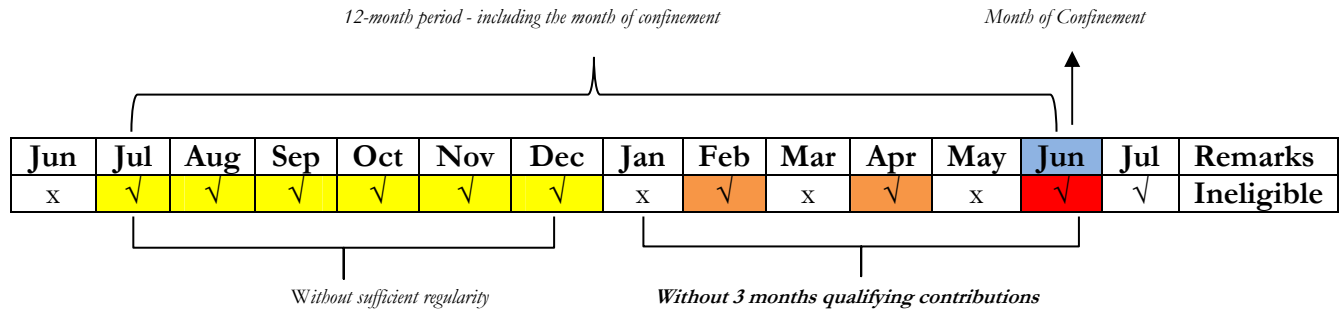


Illustration 3. Confinement date is June 20-22. Payment for June was made on June 23, after discharge. While the patient has sufficient regularity of premium contributions, non-compliance to payment of 3 months within 6 months prior to the first day of confinement has resulted to suspension of benefit entitlement for this particular admission.



5. Is there a grace period for members of other category with expired coverage who opted to shift to the Informal Economy? How can they avail themselves of the PhilHealth benefits?

Yes. Sponsored members and OFWs may shift to Informal Economy within the three (3) - month grace period following the month of expiration of coverage of their membership validity. Employed members, including seasonal employees who have been recently separated from work may also shift to the Informal Economy within three months.

To avail themselves of the PhilHealth benefits, they should pay at least three (3) months premium contributions **prior to hospital discharge** and must show proof of sufficient regularity of premium contributions.

Illustration 1. The coverage of Sponsored Member ends on December 31, 2016. The member was admitted on February 12-20, 2017. Premium payment for January-March 2017 was made during confinement and within the grace period.

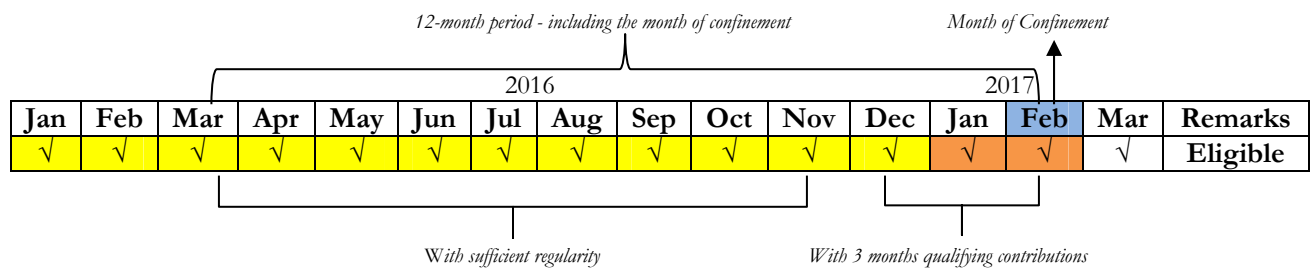


Illustration 2. The coverage of an OFW expired on August 20, 2016. Member was admitted on November 8-13, 2016. Premium payment for October-December 2016 was made during confinement and within the grace period

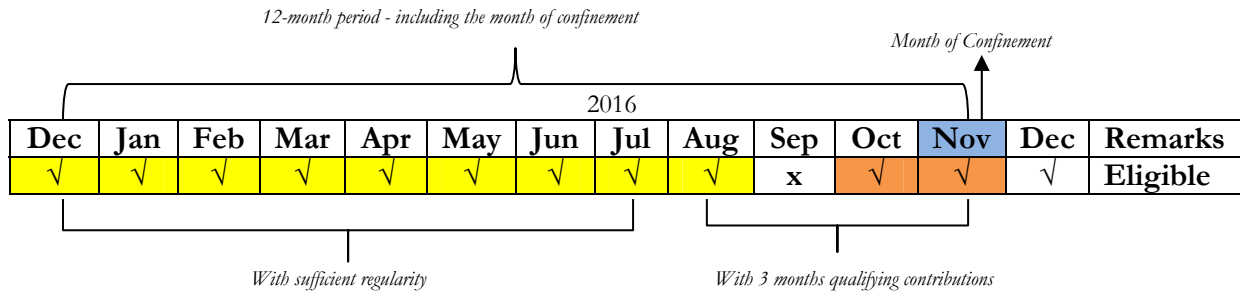


Illustration 3. An Employed member separated from employment on June 30, 2016. His/her dependent was admitted on September 27-30, 2016. Premium payment for July-September 2016 was made during confinement and within the grace period.

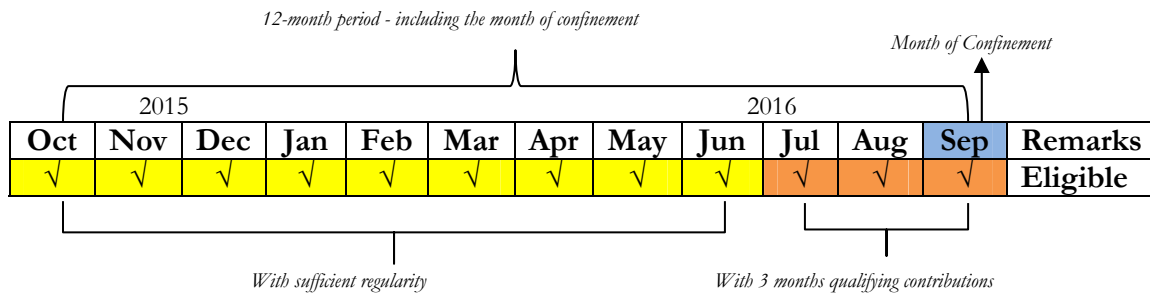


Illustration 4. Dependent child who turned 21 years old on March 20, 2017 and was admitted on April 26-29, 2017. He/She has shifted/enrolled to the Informal Economy and paid his/her premiums (April-June 2017) during confinement and within the grace period.

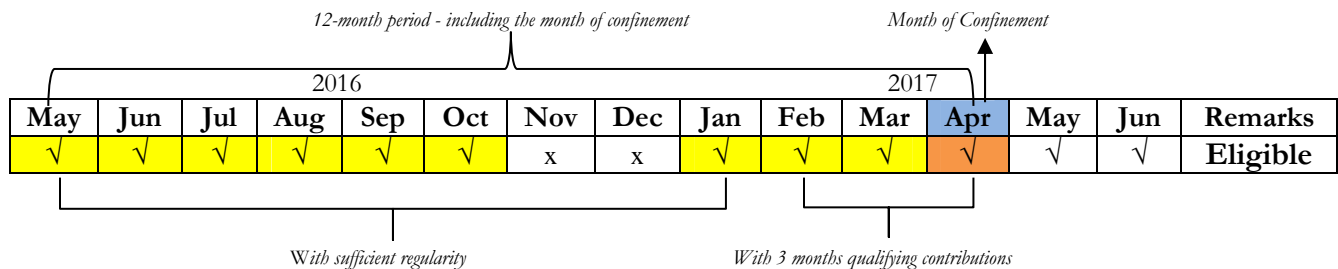
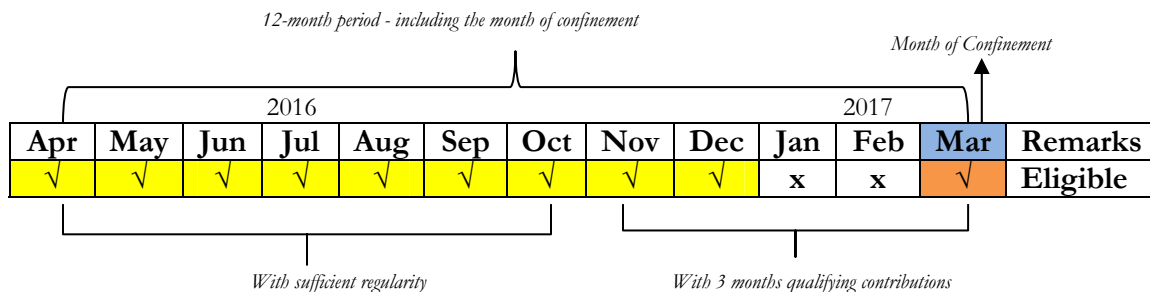


Illustration 5. The principal member died on February 15, 2017 and the dependent spouse was admitted on March 5-11, 2017. The surviving spouse shifted/enrolled as member of the Informal Economy and paid his/her premiums (March, Apr-Jun 2017) during confinement and within the grace period.



6. Are newly enrolled members of the Informal Economy required to comply with the rules on sufficient regularity of premium contributions to avail themselves of PhilHealth benefits?

Newly enrolled members with less than nine (9) months of membership from the date of initial registration to PhilHealth as primary member shall be required only to comply with the 3/6 policy in order to avail of the PhilHealth benefits. However, the rule on sufficient regularity of premium contributions shall be applied on the ninth (9th)-month of their membership to PhilHealth.

7. Is retroactive payment of premium contributions allowed by PhilHealth?

Retroactive payment of premium contributions may be allowed ONLY if members have been able to establish nine (9) consecutive months of premium contributions prior to the missed quarter. The said retroactive payment may be counted as qualifying contributions if paid prior to the first day of confinement.

8. When is the effectivity of this circular?

This Circular shall take effect starting January 1, 2018.